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## UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	TAY-04-001
First Inventor	TAYLOR MATTHEW T. SK
Title	TAYLOR MATTHEW T. S.F. ROSTHERIC FUTERIOR CASTING PROCESS AND PRODUCT
Express Mail Label No.	IER 397561597

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO:  Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450					
1. See Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure  4. Drawing(s) (35 U.S.C. 113) [Total Sheets]  5. Oath or Declaration [Total Sheets]  a. Newly executed (original or copy)  b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)  i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  6: Application Data Sheet. See 37 CFR 1.76	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. Paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations  13. Preliminary Amendment  14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. Certified Copy of Priority Document(s) (if foreign pnority is claimed)  16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.					
18. If a CONTINUING APPLICATION, check appropriate box, and suppose specification following the title, or in an Application Data Sheet under 3						
Continuation Divisional Continuation-in-part (CIP) of prior application No.:						
19. CORRESPONI	DENCE ADDRESS					
Customer Number: 40816	OR Correspondence address below					
Name						
Address						
City	State Zip Code					
	elephone Fax					
Name (Print/Type) Bradley D. Goldizen Signature 3/ N	Registration No. (Attorney/Agent) 43637					
	1 1104					

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments. and trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS\_
ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03) Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## **FEE TRANSMITTAL** for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	420	00
(+)		ì

C mplet if Known						
Application Number						
Filing Date						
First Named Inventor	TAYLOR Matter T. SC.					
Examiner Name						
Art Unit						
Attorney Docket No.	TOY-021-601					

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	None 3. ADDITIONAL FEES		S			
Deposit Account:		Entity	Small	Entity	•	
Deposit Account.	Fee Code	Fee (\$)	Fee Code	Fee	Fee Description	Eas Daid
Account	1051	130	2051		Surcharge - late filing fee or oath	Fee Paid
Number Deposit	1052	50	2052		Surcharge - late provisional filing fee or	
Account Name					cover sheet	
The Director is authorized to: (check all that apply)	1053	130	1053		Non-English specification  For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments	1812			_,	• •	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920"	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805	1,840*	Requesting publication of SIR after	
to the above-identified deposit account.	1051	440	2254		Examiner action	
FEE CALCULATION	1251	110	2251 2252	55 210	Extension for reply within first month  Extension for reply within second month	
1. BASIC FILING FEE	1252 1253	420 950	2252		Extension for reply within third month	
Large Entity Small Entity Fee Fee Fee Fee Pee Description Fee Paid	1253		2253	740	• •	
Code (\$) Code (\$)					Extension for reply within fourth month	
1001 770 2001 385 Utility filing fee	1255		2255	.,	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401		Notice of Appeal	$\vdash$
1003 530 2003 265 Plant filing fee	1402	330	2402		Filing a brief in support of an appeal	$\vdash$
1004 770 2004 385 Reissue filing fee	1403	290	2403		Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451		1451	•	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 385,00	1452	110	2452		Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453		2453		Petition to revive - unintentional	$\vdash$
Fee from	1501	,	2501		Utility issue fee (or reissue)	$\vdash$
Extra Claims below Fee Paid  Total Claims X	1502 1503	480 640	2502 2503		Design issue fee Plant issue fee	$\vdash$
Independent U 211 - V U2 - U3	1460	130	1460		Petitions to the Commissioner	$\vdash$
Claims -3 - 1 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4	1807	50	180			<del></del>
Large Entity   Small Entity					Processing fee under 37 CFR 1.17(q)	$\vdash$
Fee Fee Fee Fee Description	1806	180	1800		Submission of Information Disclosure Stmt Recording each patent assignment per	
Code (\$)   Code (\$)   1202 18   2202 9 Claims in excess of 20	8021	40	802	1 40	property (times number of properties)	
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	examined (37 CFR 1.129(b))  Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
(a) 2/m 00	Other	fee (sp	ecify) _		- ···	
**or number previously paid, if greater; For Reissues, see above	*Redu	ced by	Basic	Filing F	ee Paid SUBTOTAL (3) (\$)	

SUBMITTED BY	(Complete	(if applicable))		
Name (Print/Type)	Bradley Soldizen	Registration No. (Attorney/Agent) 43637	Telephone	(157) 490-1151
Signature	517		Date	2/6/04

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## BRAD GOLDIZEN, P.C.

INTELLECTUAL PROPERTY ATTORNEY

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Direct Dial (757) 490-1151 Facsimile (757) 497-5560 wv2dc@aol.com

February 6, 2004

Mail Stop Patent Application **Commissioner for Patents** P. O. Box 1450 Arlington, VA 22313-1450

Re:

**Utility Patent Application** 

PROSTHETIC INTERIOR CASTING PROCESS AND PRODUCT

Our Reference: TAY-02-04

Sir:

Attached is a Utility Patent application for the above-identified subject including:

**Utility Patent Application Transmittal Form Declaration-Utility Patent Application** Specification (19) 8 sheets of drawing Check in the amount of \$428.00 Fee Transmittal Form; and

Return Receipt Postcard

Please file this application and return the postcard to undersigned. Thank you for your attention to this matter.

Very truly yours,

Bradley D. Goldizen Registration No. 43,637

BDG/klf **Enclosures** 

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